MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/589057

FILING DATE

AFTER

2 nd AMENDMENT

IND. DEP.

APPLICANT(S)

CLAIMS

		AS FILED		AFTER 1*AMENDMENT		AFTER 2 MAMENDMENT			AS FILED		AFTER	
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PTO - 1340 (REV. 11/04) U.S. DEPARTMENT of COMMER												MEDCE
- 2 - 1300	(_w, 1, 11/04)								Pat	ent and Trad	mark Office	erce